

Immunization E-Letter

Issue #288

September 26, 2008

2008 Annual Immunization Conference

The Immunization Program is still accepting registrations for the October 6th Conference in Clarksville and the October 9th Conference in South Bend. Registration for the October 8th Conference in Indianapolis has been closed. If you are interested in attending and you have not registered, you will be limited to the Clarksville and South Bend locations only. You can access a registration form for the remaining two locations at the following link:

https://chirp.in.gov/chirp_files/docs/2008%20ISDH%20Conference%20Fax%20Form.pdf

E-mail or fax the attached registration form by Friday, September 30, 2008 to: jiking@isdh.in.gov or FAX: 317-233-9245

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Influenza Vaccine Availability

Now available from McKesson vaccine distribution:

- 43,690 doses of Medimmune's FluMist in the 10 pack, one-dose sprayers
- 47,110 multi-dose vials of Sanofi <u>Fluzone</u> in the 10 pack, multi-dose vials.

Immunization Program

2 N. Meridian St. Indianapolis, IN 46204

Phone: (800) 701-0704 E-mail: immunize@isdh.in.gov

VFC Supply Issues and Updates

- Please be aware that HIB vaccine is currently on back order. McKesson is working to resolve the situation and shipments will be sent out as soon as the supply is available.
- •As the Rotarix vaccine becomes available through the VFC Program please be sure that you deplete your supply of RotaTeq before beginning the use of Rotarix. Remember, if RotaTeq is used for **any dose** in the vaccine series or if the brand is unknown, the child must receive three full doses of the rotavirus vaccine.
- Please remember that you should not place your monthly orders until the first day of each month. Only one order can be submitted and processed per provider per month.

Havrix® Temporarily Unavailable

The Hepatitis A Pediatric vaccine, Havrix® 10-pack single dose <u>syringe</u>, is temporarily unavailable from GSK. CDC expects this vaccine to be available in mid-October. Orders currently on backorder will be filled when product is received. Please note that the Hepatitis A 10-pack sing dose vial is currently still available.

Reminder on Where to Return Expired/Wasted Vaccines

All expired or spoiled vaccines should be returned to McKesson. GIV is no longer the distributor for the VFC Program and the program must pay for shipping each time a return is sent to GIV. Please dispose of all GIV return labels and three part forms. If you do need to return any vaccine, use the return label as indicated on this box or call Judy Wilkison @ 800-701-0704 for the return vaccine form and the correct return labels.

DO NOT SEND ANY VACCINE TO ISDH.



Requesting Diluent from McKesson

Please compare the invoice and count the number of diluent vials as soon as MMR and Varicella shipments arrive at your clinic site to verify the correct match of vaccine doses to diluent vials. If there is a shortage of diluent vials for the number of MMR doses shipped, contact the Indiana State Department of Health (ISDH) at 800-701-0704 immediately so that McKesson Specialty Customer Care can be notified of the discrepancy. If there is a shortage of diluent vials for the number of Varicella doses shipped by Merck, please promptly contact Merck directly at 800-637-2579. Please note, Merck ships Varicella with the diluent packed in the top compartment of the shipping container (see picture). Please ensure that all diluent is removed from the top compartment of the shipping container prior to discarding/recycling the shipping container.



Revised Recommendations for Vaccination with Pneumococcal Conjugate Vaccine (PCV7)

The Advisory Committee on Immunization Practices (ACIP) has approved the following revised recommendations* for the use of PCV7 vaccine in children aged 24—59 months:

- For all healthy children aged 24–59 months who have not completed any recommended schedule for PCV7, administer 1 dose of PCV7.
- For all children with underlying medical conditions aged 24–59 months who have received 3 doses, administer 1 dose of PCV7.
- For all children with underlying medical conditions aged 24–59 months who have received <3 doses, administer 2 doses of PCV76 at least 8 weeks apart.

No changes were made to previously published recommendations regarding 1) the use of PCV7 in children aged 2 –23 months; 2) the list of underlying medical or immunocompromising conditions; or 3) the use of the 23-valent pneumococcal polysaccharide vaccine in children aged ≥ 2 years who have previously received PCV7.

*www.cdc.gov/mmwr/preview/mmwrhtml/mm5713a4.htm

Vaccine Information Statement (VIS) Updates

Text versions of all Vaccine Information Sheets (VISs) have been updated and are now available in html format (instead of the previous individual txt or rtf files). The Vaccine Information Statements can be accessed directly via the Centers for Disease Control and Prevention (CDC) webpage at www.cdc.gov/vaccines/pubs/vis/default.htm These versions are meant to be used by the visually impaired when screen-reader accessibility is required.

The **Multi-Vaccine VIS** has received minor updates to include information on Rotarix, the recently licensed second rotavirus vaccine. Otherwise, it is identical to the previous version. It is dated 9/18/08. Providers administering Rotarix and who use the Multi- Vaccine VIS should start using the new edition now. Providers not using Rotarix may deplete current stocks before beginning to use the new edition.

If you would like e-mail updates whenever changes are made to any VIS, you can subscribe for notification at the same CDC direct link as well.

http://www.cdc.gov/vaccines/pubs/vis/default.htm

Indiana Immunization Conference Agenda

7:30 a.m. – 8:30 a.m.	Registration
8:30 a.m. – 9:00 a.m.	Welcome
9:00 a.m. – 10:00 a.m.	Immunizing Healthcare Workers
10:15 a.m. – 11:00 a.m.	Breakout Sessions
	Using CHIRP for Vaccine Accountability
	Vaccine Storage and Handling Safety
	Program Integrity
11:30 a.m. – 12:30 p.m.	Lunch
12:30 p.m. – 1:15 p.m.	Breakout Sessions
1:30 p.m. – 2:15 p.m.	Breakout Sessions
2:30 p.m. – 3:30 p.m.	Ask the Expert Panel
3:30 p.m. – 4:00 p.m.	Best Practices
4:00 p.m. – 4:30 p.m.	Awards Ceremony & Closing

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Vaccine Storage and Handling - What is the Cold Chain?

Vaccines must be stored properly from the time they are manufactured until the time they are administered. Excess heat or cold will reduce their potency, increasing the risk that recipients will not be protected against vaccine-preventable diseases. The system used to keep and distribute vaccines in good condition is called the cold chain. The cold chain has three main components: transport and storage equipment, trained personnel, and efficient management procedures. All three elements must be combined to ensure safe vaccine transport and storage.

The cold chain begins with the cold storage unit at the vaccine manufacturing plant, extends through the transfer of vaccine to the distributor and then to the provider's office, and ends with the administration of the vaccine to the patient. **Proper storage temperatures must be maintained at every link in the chain.**

Excessive heat or cold exposure damages vaccine, resulting in loss of potency. Once potency is lost, it can never be restored. Furthermore, each time vaccine is exposed to heat or cold, the loss of potency increases and eventually, if the cold chain is not correctly maintained, all potency will be lost, and the vaccine becomes useless.

Some vaccines may show physical evidence of altered potency when exposed to inappropriate storage conditions, such as clumping in the solution that does not go away when the vial is shaken. Other vaccines may look perfectly normal when exposed to inappropriate storage conditions. For example, inactivated vaccines exposed to freezing temperatures (i.e., 32°F [0°C] or colder) may not appear frozen and give no indication of loss of potency. Therefore, visual inspection of vaccines is an unreliable method of assuring potency.



Properly stored vaccine Full Potency



Improperly stored vaccine Diminished Potency

Visual inspection of vaccines is an unreliable method of assuring potency.

CHIRP Informational Sessions

CHIRP Informational Sessions are designed for <u>NON-CHIRP</u> users interested in learning more about the benefits of using CHIRP in their facility or practice.

Call (888) 227-4439 or go to CHIRP.IN.GOV to register.

October 15, 2008 1:00 pm -3:00 pm

Marion County

St. Francis Hospital Conference Room 1 & 2 8111 South Emerson Ave. Indianapolis, IN 46237

CHIRP User Group Meeting -

This session is designed for <u>CURRENT</u> <u>CHIRP</u> users who are interested in learning about upcoming changes or who have specific questions regarding CHIRP usage.

Call (888) 227-4439 or go to the CHIRP.IN.GOV to register.

October 15, 2008 9:30 am -11:30 am

Marion County

St. Francis Hospital Conference Room 1 & 2 8111 South Emerson Ave. Indianapolis, IN 46237

CHIRP Tip

If you forget your password, simply click on "Forgot Password" from the login page. The CHIRP system will automatically email you a temporary password. In order for this to work, your current email address must be on file. Contact the CHIRP helpdesk at 888-227-4439 for more

Private Provider Front Office Staff Can Access CHIRP

The non-medical staff in a private provider's office can have access to CHIRP. There is a new form available in the Document Center on the CHIRP website titled Individual User Agreement with Delegation of Authority (DOA). This form is different from the Individual User Agreement and designed only for non-medical staff in a private provider office. Employees of hospitals and local health departments should continue using the Individual User Agreement, as should medical staff of a private provider office.

Indiana Adult Immunization Coalition Meeting

The upcoming Indiana Adult Immunization Coalition (IAIC) meeting will include a presentation by Bill Spurlock on the "Influenza Market and Fluzone, Influenza Virus Vaccine Update". This meeting is scheduled for Tuesday, October 14th from 10am - 12pm at the Indiana State Department of Health in the Rice Auditorium.

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